## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

09974870

| CLAIMS AS FILED - PART (Column 1)  |  |   |                |                     | (Column 2)                           |  | SMALL ENTITY TYPE |                            |                        | OR | OTHER THAN OR SMALL ENTITY |                        |
|--|--|---|----------------|---------------------|--------------------------------------|--|-------------------|----------------------------|------------------------|----|----------------------------|------------------------|
| TOTAL CLAIMS   |  |   | 25 14          |                     |                                      |  |                   | RATE                       | FEE                    |    | RATE                       | FEE                    |
| FOR  |  |   | NUMBER FILED   |                     | NUMBER EXTRA                         |  | BA                | SIC FEE                    | 370.00                 | OR | BASIC FEE                  | 740.00                 |
| TOTAL CHARGEABLE CLAIMS 26 - minus 20=   |  |   |                |                     | * 6                                  |  |                   | X\$ 9=                     | A                      | OR | X\$18=                     |                        |
| INDEPENDENT CLAIMS 2 - minus 3 =   |  |   |                |                     | *                                    |  |                   | X42=                       |                        | OR | X84=                       |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |                |                     |                                      | U                                      |                   | +140=                      |                        | OR | +280=                      | 280                    |
| * If the difference in column 1 is less than zero, ente  |  |   |                |                     | r "0" in co                          | olumn 2                                |                   | TOTAL                      |                        | OR | TOTAL                      |                        |
| CLAIMS AS AMENDED - PART (Column 1) (Column  |  |   |                |                     |                                      | (Column 3)                             | Ş                 | SMALL E                    | ENTITY                 | OR | OTHER<br>SMALL I           | I                      |
| MENT A   |  | CLAIMS REMAINING AFTER AMENDMENT          |                | HIGI<br>NUN<br>PREV | HEST<br>MBER<br>IOUSLY<br>O FOR      | PRESENT<br>EXTRA                       |                   | RATE                       | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
| DME  | Total  | *   | Minus          | **                  |                                      | =                                      |                   | X\$ 9=                     |                        | OR | X\$18=                     |                        |
| AMEND  | Independent                                    | *   | Minus          | ***                 |                                      | =                                      |                   | X42=                       |                        | OR | X84=                       |                        |
| <b>▼</b>   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                     |                                      |  |                   | +140=                      |                        | OR | +280=                      |                        |
|  |  |   |                |                     |                                      |  |                   | TOTAL<br>ODIT. FEE         |                        | OR | TOTAL<br>ADDIT. FEE        |                        |
|  |  | (Column 1)                                |                | (Coli               | umn 2)                               | (Column 3)                             | , A               | JUN: 1 C.2                 |                        |    |                            |                        |
| NT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | NU<br>PRE\          | SHEST<br>MBER<br>/IOUSLY<br>D FOR    | PRESENT<br>EXTRA                       |                   | RATE                       | ADDI-<br>TIONAL<br>FEE |    | RATE                       | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT  | Total  | *   | Minus          | **                  |                                      | =                                      |                   | X\$ 9=                     | _                      | OR | X\$18=                     |                        |
|  | Independent                                    | *   | Minus          | ***                 |                                      | =                                      |                   | X42=                       |                        | OR | X84=                       |                        |
|  | FIRST PRESE                                    | NTATION OF N                              | MULTIPLE DE    | PENDE               | NI CLAIM                             |  | J                 | +140=                      |                        | OR | +280=                      |                        |
|  |  |   |                |                     |                                      |  | L                 | TOTAL<br>DDIT. FEE         |                        | OR | TOTA<br>ADDIT. FE          |                        |
|  |  | (Column 1)                                |                | (Co                 | lumn 2)                              | (Column 3)                             |                   |                            |                        | _  |                            |                        |
| NTC  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMEN  |                | NI<br>PRE           | GHEST<br>JMBER<br>VIOUSLY<br>AID FOR | PRESENT<br>EXTRA                       |                   | RATE                       | ADDI-<br>TIONAL<br>FEE | -  | RATE                       | ADDI-<br>TIONAL<br>FEE |
| O N  | Total  | *   | Minus          | **                  |                                      | =                                      |                   | X\$ 9=                     |                        | OF | X\$18=                     | :                      |
| AMENDMENT  | Independent                                    | *   | Minus          | ***                 |                                      | =                                      | <b> </b>          | X42=                       |                        | OF | X84=                       |                        |
|  | FIRST PRES                                     | ENTATION OF                               | MULTIPLE D     | EPENDE              | ENT CLAIN                            | И                                      | ┛╽                | +140=                      |                        | OF | 000                        | :                      |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20. |  |   |                |                     |                                      |  |                   | TOTA                       |                        | OF | , TOT/                     |                        |
|  | * If the "Highest N                            | umber Previously                          | Paid For" IN T | HIS SPAC            | CE is less th                        | nan 20, enter "20<br>nan 3. enter "3." |                   | ADDIT. FEI<br>and in the a |                        |    | ADDIT. PE                  | :C                     |